

**PART B - FEE(S) TRANSMITTAL**

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE  
**Commissioner for Patents**  
**P.O. Box 1450**  
**Alexandria, Virginia 22313-1450**  
**or Fax** (571)-273-2885

**INSTRUCTIONS:** This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

7590 12/12/2006  
**Andre M. Szuwalski**  
**Jenkens & Gilchrist, P.C.**  
**Suite 3200 02/28/2007 WASFAW2 00000023 10665376**  
**1445 Ross & Ave**  
**Dallas, TX 75202-2192:1501**  
**02 FC:1504** 1400.00 0P  
**300.00 0P**

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

**Certificate of Mailing or Transmission**

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

<i>Marco Barbarash</i>	(Depositor's name)
<i>M. Szuwalski</i>	(Signature)
February 22, 2007	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/665,376	09/18/2003	Steven Fluxman	61170-00018USPX	5019

TITLE OF INVENTION: RAKE RECEIVER HAVING SEVERAL FINGERS AND METHOD OF PROCESSING AN INCIDENT SIGNAL THEREIN

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$0	\$1700	03/12/2007

EXAMINER	ART UNIT	CLASS-SUBCLASS
LE, LANA N	2618	455-132000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.	<i>Jenkens &amp; Gilchrist, PC</i>
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	2 _____
	3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

**SIMicroelectronics S.A.**

**Montrouge, France**

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are submitted:

Issue Fee  
 Publication Fee (No small entity discount permitted)  
 Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

A check is enclosed.  
 Payment by credit card. Form PTO-2038 is attached.  
 The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 10-0447 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27       b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature \_\_\_\_\_

Date February 22, 2007

Typed or printed name Andre M. Szuwalski

Registration No. 35,701

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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CUSTOMER NO. 23932

PATENT APPLICATION  
Docket No. 61170-18USPX

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:  
Steven Fluxman et al.

Examiner: L. N. Le

Application No.: 10/665,376

Confirmation No.: 5019

Filed: September 18, 2003

Art Unit: 2685

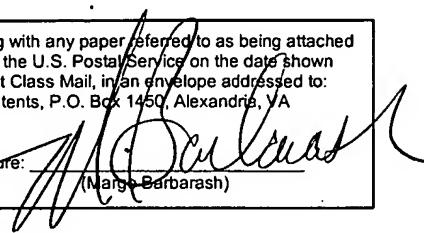
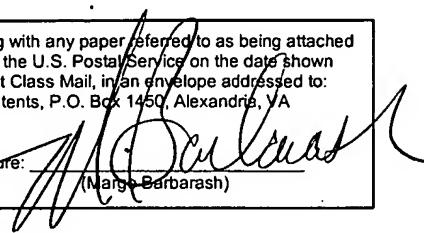
For: RAKE RECEIVER HAVING SEVERAL FINGERS AND METHOD OF  
PROCESSING AN INCIDENT SIGNAL THEREIN

TRANSMITTAL LETTER

MS Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to:  
MS Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA  
22313-1450.

Dated: February 22, 2007

  
Signature:   
(Margo Barash)

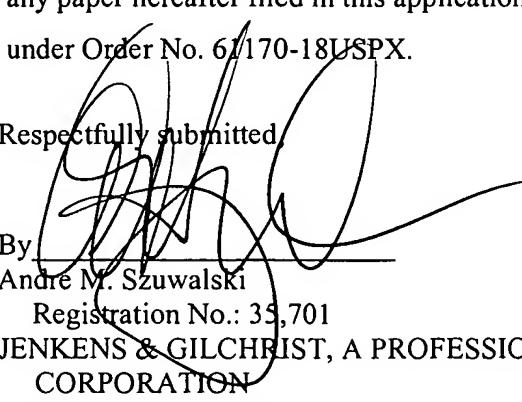
Dear Sir:

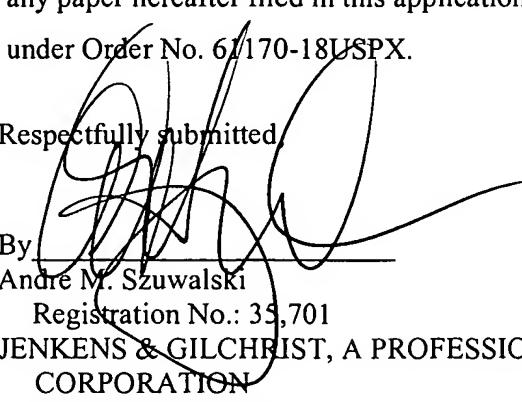
Enclosed are the following items for filing in connection with the above-referenced Patent Application:

1. Form PTOL-85 Part B-Fee Transmittal;
2. Fee Transmittal; and
3. Acknowledgment postcard.

Our check in the amount of \$1,700.00 covering the required fees, is enclosed. The Director is hereby authorized to charge any deficiency in the fees filed, asserted to be filed or which should have been filed herewith (or with any paper hereafter filed in this application by this firm) to our Deposit Account No. 10-0447, under Order No. 61170-18USPX.

Dated: February 22, 2007

  
Respectfully submitted,

By   
Andre M. Szwalski

Registration No.: 35,701

JENKENS & GILCHRIST, A PROFESSIONAL  
CORPORATION

1445 Ross Avenue, Suite 3700

Dallas, Texas 75202

(214) 855-4500

Attorneys For Applicant

CUSTOMER NO. 23932

PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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**Effective on 12/08/2004.**  
**Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).**

**FEE TRANSMITTAL**  
**For FY 2006**

Applicant claims small entity status. See 37 CFR 1.27

**TOTAL AMOUNT OF PAYMENT** (\$ 1,700.00)

<b>Complete if Known</b>	
Application Number	10/665,376-Conf. #5019
Filing Date	September 18, 2003
First Named Inventor	Steven Fluxman
Examiner Name	L. N. Le
Art Unit	2685
Attorney Docket No.	61170-18USPX

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 10-0447 Deposit Account Name: Jenkins & Gilchrist, a Professional Corporation

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee  
 Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17  Credit any overpayments

**FEE CALCULATION**

**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>	
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>
Utility	300	150	500	250	200	100
Design	200	100	100	50	130	65
Plant	200	100	300	150	160	80
Reissue	300	150	500	250	600	300
Provisional	200	100	0	0	0	0

**2. EXCESS CLAIM FEES**

Fee Description

Each claim over 20 (including Reissues)

<u>Fee (\$)</u>	<u>Small Entity</u>
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50 25

Each independent claim over 3 (including Reissues)

200 100

Multiple dependent claims

360 180

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>
26	- 27 =	x	=	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Fee (\$)</u> <u>Fee Paid (\$)</u>
5	- 5 =	x	=	_____

HP = highest number of independent claims paid for, if greater than 3.

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

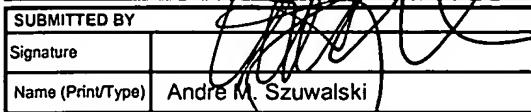
<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/50	(round up to a whole number) x	=	_____

**4. OTHER FEE(S)**

Non-English Specification: \$130 fee (no small entity discount)

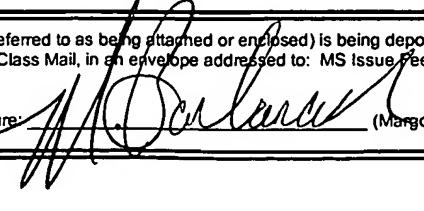
Fees Paid (\$)

Other (e.g., late filing surcharge): 1501 Utility issue fee 1,400.00  
1504 Publication fee for early, voluntary, or normal ... 300.00

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	35,701 Telephone (214) 855-4795
Name (Print/Type)	Andre M. Szuwalski	Date	February 22, 2007

I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on the date shown below with sufficient postage as First Class Mail, in an envelope addressed to: MS Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: February 22, 2007

Signature:  (Margo Barbarash)



**FEE SUMMARY SHEET**  
**Transmittal -- Issue Fee Pkg. (J&G)**

Date: February 20, 2007 Filing Date: September 18, 2003  
Time: 7:19 PM Application No: 10/665,376  
Docket: 61170-18USPX Total Fee: \$ 1,700.00

Code	Amount	37 CFR	Fee Description	Listed on
1501	1,400.00	1.18(a)	Utility issue fee	Fee Transmittal (PTO SB-17)
1504	300.00	1.18(d)	Publication fee for early, voluntary, or normal publication	Fee Transmittal (PTO SB-17)